

UAW INTERDEPARTMENTAL TRANSFER LIST FORM

This form is used to place your name on the UAW Interdepartmental Transfer List for your current class and level in those Employment Locations (counties/regions) and Employment Types you designate on this form.

Print clearly – this is your return label. See instructions on page 2.

Name _____ Employee I.D. # _____
Address _____ Phone: Work _____
_____ Home _____

Current Class Title and Level _____

Employment Locations

Employment Types

IF YOU SUBSEQUENTLY WISH TO MAKE CHANGES TO THE EMPLOYMENT LOCATIONS OR EMPLOYMENT TYPES YOU HAVE DESIGNATED, YOU MUST SUBMIT A NEW FORM TO YOUR PERSONNEL OFFICE.

Submit the form per departmental instructions. A copy will be returned to you as notification that your name has been placed on the interdepartmental transfer list for the employment locations indicates above. Your name will be retained on this list until it has been removed according to the contract, or until the annual September 30 expiration.

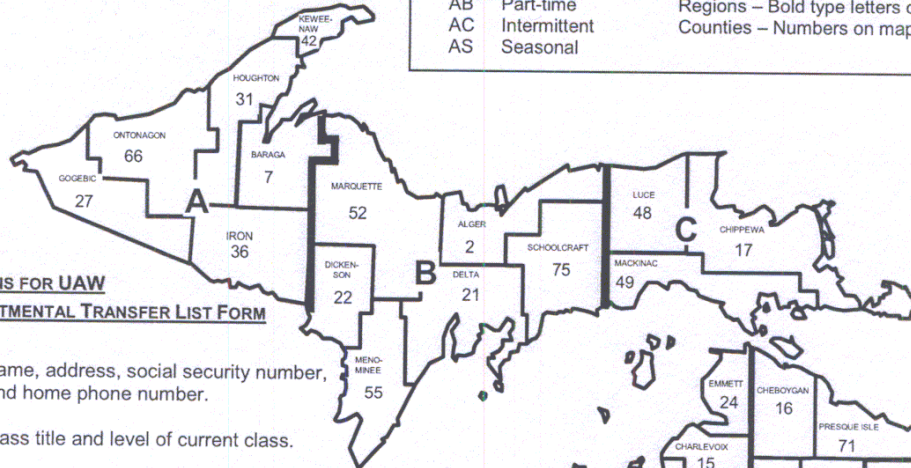
Signature: _____ Date: _____

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FOR PERSONNEL USE ONLY

Processed by: _____ Date: _____

Code	Types	Employment Locations
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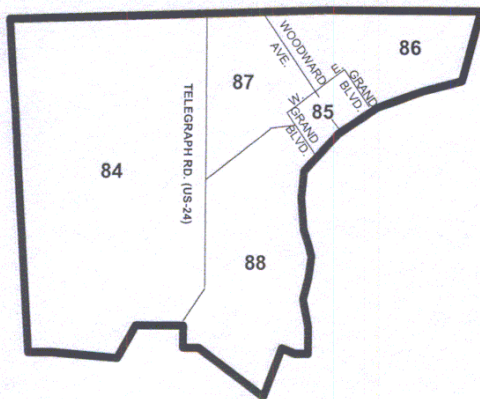
AA	Full-time	Statewide - 99
AB	Part-time	Regions – Bold type letters on map
AC	Intermittent	Counties – Numbers on map
AS	Seasonal	



INSTRUCTIONS FOR UAW

INTERDEPARTMENTAL TRANSFER LIST FORM

1. Enter name, address, social security number, Work and home phone number.
2. Enter class title and level of current class.
3. Enter the employment locations at which you would accept transfer within your current class and level using the employment location codes on the right.
4. Enter the employment types to which you would accept transfer within your current class and level using the employment codes at the right.
5. Sign and date the form.
6. Submit the completed form to your Personnel Office, unless otherwise instructed.



WAYNE COUNTY

R = WAYNE COUNTY (DETROIT AREA)

IF YOU ARE NOT AVAILABLE FOR ALL OF WAYNE COUNTY, YOU MAY SELECT CERTAIN AREAS OF THE COUNTY BY USING THE NUMBERS FROM THE MAP ABOVE.